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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

No RD

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

No RD

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY OR	SHEETS DRAWING 5	TOTAL CLAIMS 68	INDEPENDENT CLAIMS 6
Verified and Acknowledged	Examiner's Signature <i>Robert D. D. D.</i> Initials				

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## TITLE

Ink delivery regulation apparatus and method of use

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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